

Section Three, Part C: Technical Team Members

Please list the core team members of your capital assets project, including but not limited to:
(There are no line limitations.)

Title	Name/Firm/Location	Previous Experience in Managing Capital Assets Projects	Duties Regarding This Capital Assets Project
Project Manager			
Architect			
General Contractor			
Engineer			
Other			
(Specify Title)			

Section Three, Part D: Work Plan

Please use the chart below to provide the following: (There are no line limitations.)

Task	Deliverables	Who will perform task	Cost	Source of funds to pay for Cost	Start Date	Completion Date

Section Four, Part A: Staff Leadership

List individuals of your staff who will be directly responsible for working on this Project. (There are no line limitations.)

Name	Title	Years with Organization	Previous Experience with Capital Assets Projects	Specific Role in this Project

Section Four, Part B: Organizational Governing Body

DIVISIONS ONE, TWO, AND THREE ONLY

List the individuals of your governing body (Board, Advisory Committee) who will be directly responsible for decision making on this Project. (There are no line limitations.)

Name	Affiliation (Specify Position on Board/Advisory Committee)	Years with Organization	Previous Experience with Capital Assets Projects	Specific Role in this Project

Section Four, Part B: Community Involvement

DIVISION FOUR ONLY

List the individuals who are involved in your Project and their role in the decision-making process of your Project. (There are no line limitations.)

Name	Title with Project or Profession	Years Participating in the Project	Previous Experience with Capital Assets Projects	Specific Role in this Project	Type of Decision-making authority provided to individual/entity

Section Four, Part C: Matching Funds

Please fill in the chart below to indicate how you will fulfill your 1:1 matching fund requirement:
(Cash / Pledges/In-Kind)

Source of Funding	Amount	When Pledge was/will be received	Restrictions	% of Total Match
Cash (specify earned or contributed)				
Pledges				
Loans				
Line of Credit				
List In-Kind Contributions Below*				
Labor				
Supplies and Materials				
Equipment				
Permanent Fixtures				
Planning				
Appraisal of lease				
Appraisal of donated real property				

Total: \$ _____
(total should be one half of the total cost of your capital assets Project)

Section Four, Part D: Financial Management and Capacity

DIVISIONS ONE, TWO, AND THREE ONLY*

1. Financial Management

Annual Operating Budget: \$ _____
Cost of Capital Assets Project: \$ _____
Date that you initiated fundraising for Capital Assets Project: _____

Source of Funds for Capital Assets Project (specify in chart below):

a. Cash Contributions

Type of Donor - indicate whether it is 1. individual 2. government 3. foundation	Amount Received	Year Awarded or Pledged	Restricted to this Project only? (Indicate "YES" or "NO".)
	\$ _____		

Funds to Date: \$ _____

b. Cash Earned

Earned Income (Specify the type of income, i.e., rental, store)	Amount Received	Year Received
	\$ _____	

Funds to Date: \$ _____

Total Funds to Date: \$ _____
(Combine two sources above)

c. Loans/Line of Credit

Amount Borrowed	Terms of Loan (include interest rate, projected payments,
\$ _____	

Section Four, Part E: Sustainability

DIVISION FOUR ONLY

List the past three years of financial history of the Agency/Department directly in charge of this Project specifying the annual operating budget and what percentage is directed toward capital

Year (Start with most recent)	Operating Budget for Agency/Department	Percentage Allocated for Capital Assets Projects (include existing and new)